PTO/SB/17 (01-06)
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Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL For FY 2006				Complete if Known Application Number 09/820,915-Conf. #3432					
				Filing Date		March 30, 2001			
				First Named Inventor		Takashi SUMADA			
				Examiner Name		V. U. Brown			
Applicant claims small entity status. See 37 CFR 1.27				Art Unit		2635			
TOTAL AMOUNT OF PAYMENT (\$) 1,240.00				Attorney Docket No.		0505-0798P			
METHOD OF PAYMEN	T (check all	that annly)			L.				
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x Check Credit Card Money Order Other (please identify):									
X Deposit Account Dep	osit Account Num	ber: <u>02-2448</u> (Deposit Acc	count Name:	Birch, Ste	ewart, Kolasch	& Birch,	<u>LLP</u>	
For the above-iden	tified deposit	account, the D	irector is	— —					
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fe								the filing fee	
Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17									
FEE CALCULATION (A	All the fees	below are d	ue upo	n filing or may	be subje	ect to a surcha	ırge.)		
1. BASIC FILING, SEARCI							•		
	FILIN	G FEES Small Entity	SE	ARCH FEES Small Entity	EXAMI	NATION FEES Small Entity			
Application Type	Fee (\$)	Fee (\$)	Fee (\$		Fee (\$)	Fee (\$)	<u>Fees</u>	Paid (\$)	
Utility	300	150	500	250	200	100			
Design	200	100	100	50	130	65			
Plant	200	100	300	150	160	80			
Reissue	300	150	500	250	600	300			
Provisional	200	100	0	0	0	0			
2. EXCESS CLAIM FEES							Ean (\$)	Small Entity Fee (\$)	
Fee Description	ling Daigener	١					Fee (\$) 50	25	
Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues)							200	100	
Multiple dependent claims	-	15 110.00000)					360	180	
			Paid (\$)	М	ultiple Depende				
18 - 20 =	x _						ee Paid (
HP = highest number of total cla	ims paid for, if g	reater than 20.							
		ee (\$)	Fee F	Paid (\$)					
3 -3=	X								
HP = highest number of indeper	•	ror, ir greater tha	n 3.						
3. APPLICATION SIZE FEI If the specification and dr listings under 37 CFR sheets or fraction there	awings exceed 1.52(e)), the	application siz	e fee du	e is \$250 (\$125 fe				0	
	xtra Sheets			dditional 50 or frac	tion therec	of Fee (\$)	Fee	Paid (\$)	
- 100 =		/50		(round up to a who			·		
4. OTHER FEE(S)							Fees Paid (\$)		
Non-English Specification, \$130 fee (no small entity discount)							700.00		
Other (e.g., late filing surcharge): 1801 Request for continued examination (RCE) (see 37 1252 Extension for response within second month							790.00 450.00		
SUBMITTED BY	\ \	2.10							
Signature Signature	/\()	Kall.		Registration No.	43,368	Telephone	(703) 20	5-8000	
Name (Print/Type) Haul C. L	ewis	Talice	7	(Attorney/Agent)	. 5,555		August 22, 2006		
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